#### SUMMARY OF

# NRC/DOE QUARTERLY QUALITY ASSURANCE MEETING APRIL 18, 2002

This NRC/DOE Quarterly Quality Assurance Meeting was held on April 18, 2002 in Las

 $$\operatorname{Vegas},\ \operatorname{NV}$$  with video and audio connections to the NRC office in Rockville,  $\operatorname{MD},$  the  $\operatorname{DOE}$ 

offices in the Forrestal Building, the Center for Nuclear Waste Regulatory Analyses  $\,$ 

(CNWRA or the Center) in San Antonio, TX and the Region IV NRC offices. A copy of the

agenda is attached (Enclosure 1). A list of attendees is on Enclosure 2. The  $\ensuremath{\text{meeting}}$ 

convened

with opening remarks from J. Russell Dyer (DOE). Dr. Dyer's opening remarks are included

immediately following the summary of Dr. Chu's remarks.

Summary of Dr. Mar~aret Chu's Remarks

In her opening remarks, Dr. Margaret S. Y. Chu, Director of DOE's Office of Civilian

Radioactive Waste Management (OCRWM), stated her belief that the program is very

important to the nation and its security. She believes that quality assurance (QA) is critical

to

assuring the scientific integrity of the program, and she intends to assure that the  $\mathtt{Q}\mathtt{A}$ 

program

is implemented in a manner that will support a successful license applicati on. She emphasized

her belief that OCRWM's QA program should:

- Strike the right balance between process and objective;
- $\bullet\,$  Not only identify problems but properly focus on effective corrective actions; and
  - Be proactive, not just a reaction to audits or CARs.

She has assigned Gene Runkle of her staff to assist the Yucca Mountain Site Characterization

Office in achieving timely and continuous improvements in the QA process.

With regard to selecting a new Director of the Office of Quality Assurance, Dr. Chu indicated

that she understands the urgency associated with filling this position and will do so

deliberately to assure the right selection. She further indicated that she  $$\operatorname{\textsc{Page}}\ 1$$ 

expects to interact

with the NRC frequently and actively encourages feedback from the NRC.

 $\,$  The NRC indicated that they were gratified and encouraged by Dr. Chu's understanding of

the

importance of management involvement in solving the problems in DOE's QA program.

Dr. Russell Dyer's Opening Remarks

 $\,$  Dr. Dyer stated that the Yucca Mountain Site Characterization Office (YMSCO) is

completely on board with  $\mbox{Dr. Chu's approach;}$  her involvement and support is key to the

project's success.

Both the BSC General Manager (Mr. Ken Hess) and the YMSCO Project Manager (  $\mbox{\rm Dr.}$ 

Dyer)

have substantially increased their personal involvement in the development of the  $\ensuremath{\mathsf{OCRWM}}$ 

-1-

 $\label{eq:management_model} \mbox{Management Improvement Initiatives (OMII) and will continue person all oversight of the }$ 

implementation of the CAR and OMII actions.

 $\bullet\,$  YMSCO and BSC management has taken a far more aggressive approach to the problems

than in the past;

 $\bullet\,$  OMII is the DOE plan for bringing the Project's culture to a level neede d to support

licensed activities;

 $\bullet\,$  OMII has been given new leadership and a substantial infusion of resourc es by DOE,

BSC, the National Laboratories and USGS;

 $\bullet\,$  DOE and BSC are re-evaluating the actions in the OMII and are significantly increasing

the detail and, in some cases, the comprehensiveness of the planned actions;

 $\bullet\,$  The Project is focusing the actions for the Software and Modeling CARs' root causes to

significantly improve DOE's ability to prevent recurrence;

 $\bullet\,$  The OMII will be a prepared, issued and administered under the DOE QA program

procedures;

• The CAR corrective actions will be addressed via Procedure AP 16.1 Q "Ma Page 2  $\,$ 

nagement

of

Conditions Adverse to Quality" and also tracked in OMII;

- OMII will contain all action plans;
- $\bullet$  Performance metrics will be established and individuals assigned actions will be held

accountable. DOE will provide the NRC with their plans for self assessme nts and  $\mathtt{QA}$ 

oversight of the OMII by both DOE and BSC;

 $\bullet\,$  The results of the performance measures, self assessments and results of QA oversight

will be used to identify necessary course changes in our program.

 $\,$  DOE has also chartered ajoint DOE and BSC senior management team to conduct a lessons

learned evaluation of the past problems in approaching CAR root causes and  $\mathtt{OMII}$ 

development.

- $\bullet$  Their objective is to identi~ and implement lessons learned in the DOE Q A Program.
- $\bullet\,$  To date, they have identified a need to conduct a CAR/Root Cause conflic t resolution

meeting and the necessity to amend the CAR 001 Response.

 $\,$  Dr. Dyer stated that he would keep the NRC informed as that effort progress es.

 $\,$  Dr. Dyer indicated that DOE has an extensive set of performance metrics whi ch will be

 $\,$  provided to the NRC staff monthly. In many cases, the metrics appear to sho  $\,$  w positive

performance; for example, the number of open quality deficiencies and their average age is

declining, indicating that successful implementation of corrective actions.

However, he indicated that the statistic cannot be taken by itself, i.e. it does not tell it all:

 $\bullet\,$  the total number of newly identified deficiencies has decreased over several months as

 $\,$  the percentage of new deficiencies issued by the BSC and DOE line organizations

• the number of deficiencies open for more than 100 days is increasing

Dr. Dyer indicated that he, Mr. Hess and the leadership team are more directly focusing on

these and the other quality metrics than previously.

-2-

The OMII addresses improving YMP's self critical attitudes and the need to improve the

ability for the line to identify and address conditions adverse to quality. The  ${\tt OMII}$ 

Leadership

Team (including the YMSCO Director, the BSC General Manager, and their seni or staff) is  $\frac{1}{2}$ 

 $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

program, the YMP Deputy Project Manager has been designated as the "Project Corrective

Action Coordinator. "Further:

 $\bullet\,$  BSC, the National Laboratories, USGS, and the DOE Office of Environmenta 1

Management are being directed to identify a responsible Point of Contact to interface with

 $\,$  Dr. Dyer's organization and assist in the oversight and resolution of corrective action

issues in their areas under the cognizance of the Corrective Action Coordinator;

This responsibility includes evaluating performance metrics and ensuring that

appropriate

actions are taken in response to that data;

 $\bullet\,$  This lunction will also assure that follow up actions such as self asses sments to ensure that

DOE corrective actions are effective.

Dr. Dyer noted that his opening remarks were more extensive than they have been in the past,

reflecting the personal involvement and conviction of YMP senior management in improving

performance. DOE intends to regularly update the NRC on status and results.

quality Assurance Pro $\sim$ ram Status (bv Mr. Ram Murthy Actin $\sim$  Director OOA) - included

as Enclosure 3

Primary topics discussed were the status of the QA organization, Corrective Action Report

status, trending results/emerging issues and the Quality Assurance Requirem ents  $\label{eq:potential} \text{Document}$ 

(QARD) revision.

The acceptance of the modeling CAR referred to in the presentation is, in f act, a modified

response. Both CARs are being revisited to assure that there are appropriat e and effective

corrective actions. The NRC asked questions regarding the timing of issuing the Lessons

Learned on these (and previous) CARs. The response is that completion of the Lessons

Learned is fairly close, but that it is more important to get it done correctly than to issue it

immediately.

Revision 12 to QARD is planned to incorporate the increased BSC QA responsibility. The

 $\,$  NRC asked if the revision will be in place prior to giving BSC audit respon sibility. DOE

responded that this was the plan, but it was possible that the transition c ould take place prior

to issuing Rev. 12 (although this would not reflect any reduction in QA com mitments).

Current timing for issuing Rev. 12 of the QARD is approximately six to eight weeks from the

date of the meeting.

There was discussion of the planned revision to the QARD' to appropriately address the  $\,$ 

YMRP. NRC cautioned that the YMRP is a draft document and will not be final ized until

 $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

1 ~ is currently anticipated that this Will be Revision 13 to the QARD.

-3-

 $\hbox{that the QARD revision addressing the YMRP will be issued only aft} \\ \hbox{er the final} \\ \hbox{YMRP is} \\$ 

issued and will take account of the changes as a result of the public comme nts. There was

some discussion of what review criteria and/or comparison documents were being used for  $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

 $\,$  comparison with the YMRP. Ms. April Gil (DOE) indicated that licensing precedence from

the commercial industry should be considered as a principal criteria. Mr. S tephen Cereghino

reactors was being used to support their review of the YMRP. Mr. Robert Lat ta (Onsite

Representative, NRC) indicated that NUREG-0800 was not specifically applicable to YMP.

 $\,$  Mr. Cereghino responded that comparable portions of NUREG-0800, particularly as they

applied to similar types of systems (especially fliel handling, for example ) were being used for  $\frac{1}{2}$ 

review.

OCRWM Management Improvement Initiatives (presented by Mr. Joseph Ziegler)

Enclosure 4)

The primary points of Mr. Ziegler's presentation were:

- The OMII approach has been revised to strengthen the earlier document;
- Additional resources have been added and efforts increased to achieve ad ditional buy-in

down to the supervisory level;

- Actions are being taken to strengthen corrective actions;
- As part of developing the revised version, reviews were done against the documents

the needed corrective actions;

 $\bullet\,$  A cross-walk has been developed to identify the relationship between the OMII Action

Summaries and Objectives and the original documents that identified issu es and needed

corrective actions (including the root cause analyses);

 $\bullet$  Clear defined schedules for implementation of actions in the OMII will be included as part

of the OMII;

• Performance metrics will be an integral part of the OMII to measure both progress in

implementation and effectiveness;

 $\bullet$  The OMII is a Program initiative that involves representatives from each program team

 $\,$  member and requires that all of the Program/Project organizations act as a team in

carrying out the actions of the OMII.

Aspects of the DOE progra~n and reporting on its progress and results will be made visible

the project at large  $\operatorname{\mathsf{--}}$  not just to managers. Responsible managers have been named at

both

 ${\tt DOE}$  (Mr. Ziegler) and BSC (Ms. Nancy Williams). The intent is for this to be one program

and for involved personnel to treat it as a single cooperative program. Par  $\boldsymbol{t}$  of the intent of

the

revision is to assure that results of the root cause analysis were properly included. When done,

the outcome of OMII should be greater than the sum of its parts.

 $\,$  The NRC observed that the original January submittal did not meet NRC expectations as

was

 $% \left( 1\right) =\left( 1\right) \left( 1\right)$  confirmed by a team assisting the onsite representatives in evaluating the action

summaries. It

-4-

 $\,$  now appears (with the April 5, 2002 letter) that OMII is back on t rack, but the NRC is

awaiting the results.

Mr. Ziegler offered that his goal was to complete the OMII by the end of April, however, Dr.

Dyer told Mr. William Reamer  $\sim\!RC)$  that the "next few months" would be reasonable, that

DOE is committed to do it right.2

 $\,$  Mr. Reamer asked whether a lessons learned was being done on the way the OM II was

handled earlier. Dr. Dyer confirmed that that was the case, and that he expected input  $\frac{1}{2}$ 

within

a month.

 $\mbox{Mr.}$  Latta (NRC) asked how DOE would update the NRC on the status of correct ive actions,

which Dr. Dyer essentially took under advisement.

 $\mbox{\rm Mr.}$  Latta asked whether the OMII would include detailed schedules for imple mentation, to

which Mr. Ziegler replied affirmatively.

 $\,$  Mr. Latta asked about an audit schedule to ven.f~ the implementation of corrective actions.

 $\,$  Mr. Ziegler responded that the OMII will require quarterly audits with esta blished schedules

and semi-annual management assessments.

 $\,$  Mr. Latta asked about whether the intent is for OMII to be a "living" document (which was

alluded to in pre-revision discussions), to which Mr. Ziegler replied his expectation is that  $% \left( 1\right) =\left( 1\right) +\left( 1$ 

the

 $\,$  OMII will take DOE where it needs to go, at which time regular processes wo uld follow. It is

not expected to take on a life of its own, but will probably be ongoing for one to two years.

Mr. Wes Patrick (of the Center for Nuclear Waste Regulatory Analysis) raise d a question

regarding techniques for ownership and accountability. Mr. Ziegler replied that this effort

had

already begun with a kick-off meeting led by senior management and attended by key middle

 $\mbox{\tt management}$  representatives. He also discussed the use of a core team and su b-groups.

In

addition, the people getting the assignments are helping develop plans.

 $\mbox{\rm Mr. Patrick}$  asked about incentives for personnel;  $\mbox{\rm Mr. Ziegler}$  responded that incentives and

 $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

objective.

Status of Data Model, and Software Corrective Action Renorts (nresented by Ms. Nancy

Williams, BSC Mana~er of Projects) - Enclosure 53

2 In subsequent discussion on the NRC/DOE Quarterly Management Meeting o n  $\mbox{\rm April}$ 

19, 2002, John

Greeves  $\sim RC$ ) requested that the submittal be made at least 30 days pri or to the next Management

Meeti

Meeting.

3 It was discovered immediately following the meeting that the footnote on slide 5 has errors; the

footnote should indicate:

- "Accepted (860)" instead of "Accepted (863)"
- "Source VLI (352Y' instead of "Source VLI (332)"
- "Total Data Citations (1212)" instead of "Total Data Citations (119

5)"

-5-

The overall theme is that DOE is making changes to ensure the infu sion of quality attributes

on

 $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

developed

will be consistent with the guidance in NUREG- 1636. Additionally, self-ass essments will

be

 $\,$  performed during the model development process focusing on validation, plan  $\,$  ning and  $\,$ 

execution.

 $\,$  Desktop guidance is being prepared to facilitate the process. The draft is scheduled for

late

next week; users have been consulted in the process. Currently DOE is using a "traveler"

to

implement guidance. In addition, a commercial process has been purchased to assist in the  $% \left( 1\right) =\left( 1\right) +\left( 1\right) +$ 

software effort.

Mr. Latta stated that he recognized all data was qualified, but asked about the status of

software? Ms.Williams discussed DR-88 that had identified 4 pieces of software requiring

qualification; two are now complete, the remaining two are being finalized. She indicated that

there is no impact on the TSPA-SR.

Mr. Latta asked if the project had an established plan for lifting the mana gement

stand-down

on software development. Ms. Williams responded to Mr. Latta that lifting the management

stand down hinges on procedure revision and training (Procedure AP-SI. 1Q) and that the  $\,$ 

December (with the procedure revision).

 $\mbox{\sc A}$  question was raised by a member of the public as to whether the models ar e available to

the

public. DOE responded that the models for supporting the LA are still under development,

but

once completed will be available to the public.

 $\mbox{Mr. Mike Markley (NRC)}$  asked about how quality assurance would address soft ware  $\mbox{models}$ 

and software reliability specifically with regard to common mode failures. Responding to  $\overline{\phantom{a}}$ 

this

question will be a new action item.

 $$\operatorname{Ms.}$  Susan Zimmerman Lynch (state of Nevada) asked who the IT experts were, where they

 $\,$  had come from and where they were assigned while on the project. It was agreed that

responding to this question would be a new action item.

 $\mbox{Mr. Larry Campbell (NRC)}$  asked about new models and internal audit schedule  $\mbox{s:}$  would

 ${\tt OQA}$  audits be performance-based or compliance/programmatic-based? Ms. Williams

responded that audits would likely be scheduled when sufficient work was completed to  $\ensuremath{\mathsf{make}}$ 

the audits valuable (likely not sooner than another three months). Audits  $\boldsymbol{w}$  ill encompass

both

 $\,$  compliance and performance issues using Chief Science Office staff personne 1 (who are

independent of those who are actually conducting the work) as technical  $\ensuremath{\mathsf{exp}}$  erts. Mr.

Murthy

also addressed this issue and responded that  ${\tt OQA}$  will continue to conduct p erformance

and

compliance-based audits, and emphasized that performance-based audits will be conducted on

The body of the slide is unchanged.

-6-

 $$\operatorname{\textsc{OMII}}$  and CAR-related committed actions. Campbell restated his understanding that  $$\operatorname{\textsc{OQA}}$$ 

would be conducting performance based audits.

The NRC requested an audit schedule (for Analysis Model Reports) for planning purposes.

 ${\tt DOE}$  expects audit schedules to be available based on the results of the OMI I and LA

planning.

 $\,$  Ms. Williams stated that DOE would revisit the qualification processes for data used for LA.

Metal SDecimens Issues (presented by Dr. Mark Peters BSC Mana~er, Science a nd

Engineering Testing) - Enclosure 6

The Metal Specimens issue involves incorrect fabrication of test specimens intended for  $% \left( 1\right) =\left( 1\right) +\left( 1\right) +\left($ 

in corrosion testing and loss of traceability of material provided to the  $\boldsymbol{s}$  upplier to be used

during the fabrication. This problem resulted in four Deficiency Reports (three of which are

closed) and one Corrective Action Report (now closed). The corrective actions include

removing the supplier from the Qualified Supplier List, increased attention to supplier quality

(including improvements in clarity of communication to suppliers), developm ent of

 ${\tt materials/samples}$  acceptance plans, and establishment of hold points during the

fabrication

process.

At the conclusion of the presentation, a question was raised regarding whet her a lessons

learned had been conducted on these issues. The response is that a lessons learned has

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the SR (as was stated in the presentation). The samples were to be used to support planned  ${\rm LA}$ 

 $% \left( 1\right) =0$  work. Another NRC question was whether the situation would impact satisfact ory completion

of the KTI Agreement Items. Dr. Peters responded that they will not have an Page 11

impact; this

schedule issue has already been considered.

The Center asked if these were the 1 - 1/2" square corrosion samples number ed D- 1 through D-

 $\,$  75. It was agreed that providing a response to this question would be an action item from the

meeting.

Action Items (presented by Ms. April Gil, DOE)

This covered the status of action items from the last meeting and identifie d new actions from

this meeting. The action items and their status are shown on Enclosure 7. Closing Remarks

The NRC commented in closing that this meeting is not the end point of the resolution but

may mark beginning of resolution. Dr. Chu commented that she expected the upcoming

-7-

 $$\operatorname{period}$  to be challenging and that she is expecting steady improvem ent. Dr. Dyer indicated

that the proof will be in DOE performance on YMP.

The NRC invited members of the public to provide comments via the Public Me eting  $\,$ 

Comment Forms which were available. ;;¼;--date½~o ~

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anet Schleuter, Branch Chief '7 Ra~Murthy, Acting Director Division of Waste ManagementOffice of Quality Assurance Office of Nuclear MaterialOffice of Civilian Radioactive Safety and Safeguards Waste Management

U.S. Nuclear Regulatory Commission U.S. Department of Energy

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J eph Ziegi , A ting AMOLRC
Office of Lic nsing and
Regulatory Compliance
Yucca Mountain Site

Page 12

Characterization Office U.S. Department of Energy

-8-

List of Enclosures

For

April 18, 2002

QA Meeting Summary

## Enclosure Description

- 1 Agenda
- 2 Affendance List
- 3 Quality Assurance Program Status
- 4 OCRWM Management Improvement Initiatives
- 5 Status of Data, Model and Software Corrective Action Reports
- 6 Metal Specimens Issues
- 7 Action Items ENCLOSURE I

Agenda

DOE/NRC Quarterly QA Meeting

April 18, 2002

9:00 AM - 12:00 PM (PT)

12:00 Noon - 3:00 PM (ET)

BSC

Room 915

Page 13

# 29.ocr 9960 Covington Cross Las Vegas, NV

### And yia Videoconference to:

U.S. Department of EnergyU.S. Nuclear Regulatory Commission Forrestal Building, Room 7F-091 Room O-3B4

1000 In dependence Avenue, SW 11545 Rockville Pike Rockville, MD

INTERESTED PARTIES MAY PAR TICIPA TE VIA TELECON BY CALLING 702-295-6081

9:00 AM Introduction

Opening Remarks

DOE/NRC

9:20 AM QA Program

Mu rthv

- QA Organization
  - Status of Open CARs and DRs
  - Trending Results
  - Other Emerging Issues
  - QARD Status

9:50 AM OCRWM Management Improvement Initiative Ziegler

10:20 AM Model and Soft~vare CARs

N. Williams

- Steps to Prevent Recurrence
- Status of Data and Software Qualification
- Model Validation

10:50 OQA Oversight of CARs and OMII Murthy
11:00 Break ALL
11:15AM Metal Sample Supplier QA Issues Peters
11:30PM Action Item Status Gil
11:45 PM Closing Remarks ALL
12:00N Adjourn
ENCLOSURE 2

QA: N/A

ATTENDANCE LIST

DOE - NRC Quarterly Quality Assurance Meeting Las Vegas, NV

April18, 2002

Name t Organization

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CENTER FOR NUCLEAR WASTE REGULATORY ANALYSES

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29.ocr MEETING ATTENDANCE

ORGANIZATION TITLEIFUNCTION TELEPHONE NUMB

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# DOE/NRC QA Meeting

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ENCLOSURE 3

\_\_YUCCA MOUNTAIN PROJECT

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Presented to:

DOEINRC Quarterly Quality Assurance Meeting

Presented by:

Ram Murthy

Acting Director, Office of Quality Assurance.. Office of Civilian Radioactive Wa~e Management Yucca Mountain Site Charactelr~ation Office
Outline

- QA Organization Status
- Corrective Action Report (CAR) Status
- Trending ResultslEmerging Issues
- QARD Revisions
- Summary

YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOEINRC Qua

rterly QA~YMMurthy1~04I18I02 ppt 2

QA Organization Status

 The Department of Energy (DOE), as the potential licensee, is responsible for the OCRWM QA functions Page 18

including the establishment and maintenance of the QA Program and verification of program implementation, as specified in  $10\ \text{CFR}\ \text{Part}\ 63.142$ 

• DOE may delegate authority but not responsibility

YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOE/NRC Qua

rterly QA~YMMurthy1~04I18/02 ppt 3

QA Organization Status (Continued)

- DOE Office of Quality Assurance (DOE OQA) and Bechtel SAIC Company, LLC (BSC QA) perform QA activities. Each organization has unique roles and responsibilities
- DOE OQA is responsible for oversight of all Affected Organizations performing work in accordance with the OCRWM QARD

YUCCA MOUNTAIN PROJECT

BSC P~sentations DOE/NRC Quar

terly QA~YMMurthy1~04/18I02 ppt 4

QA Organization Status (Continued)

 The BSC contract was recently modified to include the performance of internal audits and surveillance of BSC activities; including vendors, the USGS, and National Laboratories that support the BSC work scope

- BSC QA currently performs surveillance of BSC activities
- DOE OQA will observe selected BSC QA surveillance and in the future will observe BSC audits

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YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOEINRC Qu

arterly

QA~YMMurthy1~04/18I02 ppt 5

Corrective Action Report (CAR) Status

- Modeling CAR (BSC-01-C-001) Response accepted
- Software CAR (BSC-01-C-002) -Awaiting amended response
- Training CAR (BSC-02-C-001) Response accepted and will be in OQA verification by the end of April 2002
- Metal Samples CAR (BSC(V)-02-C-002) closed April 4, 2002

YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOE/NRC Qua

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QA~YMMurthy1~04/18I02 ppt 6

Trending ResultslEmerging Issues (July 1, 2001 - December31, 2001)

- The OCRWM Trend Report (Second Semester 2001) identified two emerging issues
- Supplier Deficiencies
  - Similar conditions identified at several BSC suppliers in several program areas; e.g., Training, Procurement Document Control, Control of M&TE, Audits, etc.
  - Not a repeat condition at one supplier
  - BSC has taken prompt management action
  - OQA will verify effective implementation of actions taken

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\_\_\_\_ YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOE/NRC Qu

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QA~YMMurthy1~04/18/02 ppt 7

Trending ResultslEmerging Issues (July 1, 2001 - December31, 2001)
(Continued)

- Cause Code Personnel Error (Inattention to Detail)
  - Personnel errors due to inattention to detail have been increasing; however:
    - Individually, these conditions are not significant
    - Majority are compliance type. No impact on products
    - Trend is notice of early concern
    - DOE and BSC Senior Management has initiated management actions
    - OQA will monitor this cause code quarterly to evaluate trend

YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOEINRC Qua

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QA~YMMurthy1~04I18/02 ppt 8

OCRWM QARD Revisions

- Revision 11 strengthened requirements for model validation utilizing NUREG-1636 as the basis document
- Revision 12 will address QA organizational changes
- Revision 13 will address new Yucca Mountain Review Plan

YUCCA MOUNTAIN PROJECT

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QA~YMMurthy1~O4I18/O2 ppt 9
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Summary

- QA organization changes will ensure that the effectiveness of the QA program is enhanced
- QA trending has resulted in the early identification of emerging issues and management actions were taken
- QARD Revision 11 is approved

YUCCA MOUNTAIN PROJECT

BSC Presentations\_DOE/NRC Qua

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ENCLOSURE 4

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Presented to:

DOEINRC Quarterly Quality Assurance Meeting

Presented by:

Joseph Ziegler

DOE Senior Technical Advisor

Office of Civilian Radioactive W~e Management

Yucca Mountain Site Characte~ation Office

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#### Objective

- Present the revised approach and restructuring of the OCRWM Management Improvement Initiative (OMII)
- Reiterate Management commitment and involvement in the OMII development and implementation
- Present mechanism for tracking and communicating results of OMII implementation

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Revised Approach - OMII

- Re-evaluate OMII to strengthen the approach and ensure effective actions to prevent recurrence
- Develop and incorporate lessons learned from previous corrective actions and management initiatives
- More comprehensive to include clearly defined actions, schedules and metrics
- Reissue as ~ document and implement in accordance with AP-5.IQ, Plan and Procedure Preparation, Review and Approval

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Revised Approach - OMII (Continued)

 Require assessment of completion and effectiveness by responsible managers, DOE & BSC QA, and senior management

Implement management tool to track and communicate results to project staff

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Management Commitment

- DOE senior manager assigned full-time responsibility for developing the revised OMII
- Executive leadership team will monitor performance on a weekly basis
- Director of OCRWM will track progress on a weekly basis

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> Management Commitment (Continued)

- Joint DOEIBSC (including National Labs and USGS) leadership for initiatives
  - Development of action summaries including:
    - · Remedial actions and actions to preclude recurrence for the

and Software CARs

• Other planned actions not directly part of CAR corrective a

but within NRC regulatory purview and subject to DOE QARD

· Additional improvements from project business practices tha

appropriate to support overall performance Page 24

Model

ctions,

t are

- Overall effectiveness reviews after implementation
- Ownership and accountability of results
- Integration sessions to achieve alignment on actions, problems, causes and path forward
- Firm commitment by management from all program participants to ensure buy-in and ownership~ of all actions

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8/02 ppt 6

ModellSoftware CARs and OMII Interface

- Considers management actions necessary to specifically address lack of timely identification of actions to preclude recurrence of conditions adverse to quality
- Parallel information in CARs and OMII
- CARfocus
  - corrective actions to address specific deficiencies
  - corrective actions to address causes and recommendations
  - Performance measures for progress and effectiveness

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ModellSoftware CARs and OMII Interface (Continued)

## OMlifocus

- Corrective actions related to management functions, such as human performance and project management, in addition to quality issues
- Performance measures for progress and effectiveness
- Detailed action summaries
- Overall achievement of plan objectives

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Concluding Remarks

- Dedicated DOE Senior Management assigned for OMII planning activities
- DOE & BSC (including National Labs and USGS) Management team commitment and ownership of implementation
- Comprehensive incorporation of lessons learned, management initiatives and CAR Corrective Action Plans
- Actions, schedules, results, and performance metrics tracked and communicated to internal and external organizations

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ENCLOSURE 5

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Presented to: DOEINRC Quarterly Quality Assurance Meeting

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Presented by: Nancy Williams Manager of Projects

Page 26

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Objective

- Provide overview of data strategy and planning for License Application (LA)
- Provide status of CAR actions taken since March 2002

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Scientific Data Status

- All data for Site Recommendation Qualified andlor Verified
- $\bullet$  Developing plans and processes to manage data needs for  ${\tt LA}$ 
  - Identifying qualification needs for data to support LA Design and Total System Performance Assessment (TSPA) updates
  - Developing approach for
    - Ensuring defensibility of data used in LA
    - Dispositioning unusedlunneeded data
- Will keep NRC apprised of progress

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	TSPA-SR PMR Data Status	
	% Data	% Data
PMR	Qualified	Verified
Biosphere	100	100
DisruptiveEvents	100	100
EBS	100	100
ISM	100	100
Near Field	100	100
SZ F&T	100	100
UZ F&T	100	100
Waste Form	100	100
Waste Package	100	100
Total	100	100
Data status as of $04/15/2002$		

Percent completion for data figures are based upon Data Tracking Numbers contained in locked

Document Input Reference System for TSPA-SR Rev 0, ICN 1.

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	VLI DIRS (Venf. Checklists)	250	250	0	(Q-TBV) ("a
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	VLI Sources (Verif. Checklist	s)352	352	0	(Q-TBV) ("d
aughters")					
	VL2 (No Verification Checklis	ts)182	182	0	(Q-TBV)
	Accepted Data (Fact)	78	78	0	(e.g., hand
books, text	books)				
	Accepted Data approved by	32	32	0	(e.g., non-
project source)					
	Assistant Manager, Office of				
	Project Execution				
	Qualified by procedures	36	36	0	
	established after 6130199				
	Unqualified DTNS qualified	282	282	0	
	per AP-SIII.2Q				
	Totals	1212	1212	0	
	Percent of Total Data Citatio	ns	100%	0%	

Notes: Document Input Reference System VL1+VL2+AP-SIII.2Q+Accepted (863)

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Source VL1 (332) = Total Data Citations (1195)

VL1 = Principal Factor Related DTN VL2 = Non-Principal Factor Re

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Models Validation Status

Model Validation Corrective Action Report (CAR) (BSC-01 -C-001)

- Corrective Actions to Prevent Recurrence (CATPR) essentially complete
  - CATPR re-evaluated and expanded slightly to ensure root causes adequately addressed; Actions in progress
  - Remedial actions will be applied to models carried forward to LA; Model planning and development in progress

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Status of Model Validation

Corrective Actions

- corrective Actions completed include:
  - chief Science Office assigned functional management responsibility
  - complete revision of AMR procedure into 2 new procedures
    - AP-SIII.IOQ Models
    - AP-SIII.9Q Scientific Analyses
  - Training on new modeling procedure by cso subject matter expert completed by 1212112001
  - Training included testing on information presented
  - Model workshop conducted during training session
  - Line and Functional Management involved in training sessions

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Model Validation Corrective Actions
What's Different

- · Model validation is integral part of model development
  - Begins at model conception, not as a final action following mode

development I documentation

- Technical Work Plan defines validation approach and criteria to ensure plans for model validation are appropriate
- "Plan the work I Work the plan" concept

Chief Science Office assigned functional management responsibility

- Validation interpretive authority and procedure owner (subject matter expert)
- Reviews model validation plan (pre-AMR development or revision), draft and final model validation documentation as developed by the line organization

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Model Validation Corrective Actions
What's Different
 (Continued)

- Timely self-identification of validation issues from cSo reviews allows Line Management to focus resources
- New modeling procedure developed consistent with  $$\operatorname{NUREG}\ 1636$$
- Self-assessments to be performed of model development process, focusing on validation planning and execution

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Software CAR Status

- Software Quality Assurance CAR (BSC-01 -C-002)
- Remedial actions complete
- CATPR reviewed and partially accepted with OQA comments; action plan rework underway
- CATPRinprogress
  - Software summits with users and developers
  - External expertise retained
  - New procedures in development
    - Improved tools for software configuration management process being implemented
    - Interim controls from Software Stand-down enhanced

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Summary

- Data Verification and Qualification
  - Data required to support TSPA-SR, Rev 0, ICN Ol was completed to support SR
  - Planning underway to ensure that data required to support LA meets QARD data qualification requirements

Software and Model Validation CAR Preventive Action implementation in progress

- Revising CAR and OMII actions plans
- Under Line Management Review
- Obtaining OQA Approval
- Continuing Implementation
- NoimpacttoSR

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Presented to:

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DOEINRC Quarterly Quality Assurance Meeting Presented by: Ram Murthy Acting Director, Office of Qu ality~ssurance Office of Civilian Radioactiv eV~~s te Management Yucca M9untain SiteCharacte~z~ion Office April 18,2002

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OCRWM Management Improvement Initiative (OMII) Oversight

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- Office of Quality Assurance (OQA) will develop a verification schedule to perform oversight of completed actions including both "Q" and "Non-Q" activities
- OQA will conduct selective oversight activities on a phased approach through the use of audits, surveillance, and in-process verifications
- BSC QA will also perform in-process surveillance
- The schedule will be monitored by OQA and updated Page 32

on a quarterly basis

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Corrective Action Report (CAR) Oversight

- Software
- Identify commitments
- Establish matrix of commitments and completion dates
- Schedule in-process verification
- Schedule verification of completed corrective action
- Modeling
  - Identify models and validation dates from P-3 Schedule
  - OQA perform verification to ensure product acceptability and process effectiveness

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ENCLOSURE 6

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Presented to:

DOEINRC Quarterly Quality Assurance Meeting

Presented by:

Mark Peters

Manager, Science and Engineering Testing

Bechtel SAIC Company, LLCIL~Iamos Na~tional Laboratory

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#### • Problems

- McDermott Technologies, Inc. (MTI) had an un-tested welded specimen lightly etched to look for features of weld defects. MTI found that the specimen consisted of both weld and base metal. This specimen was to be composed entirely of weld metal
- This prompted an investigation into the placement of welds for all customer supplied welded Alloy 22 and TiGr7 specimens, fabricated by a supplier on the OCRWM Quality Supplier List (QSL), at Lawrence Livermore National Laboratory (LLNL) and MTI

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Historical Perspective
(Continued)

- Evaluations at LLNL and MTI revealed that specimens were not fabricated in accordance with the specimen sampling location drawings and sketches included with purchase orders awarded to the supplier
- Investigations performed by Science and Engineering Testing (S&ET) further revealed that a combination of poor planning, lack of communication, and lack of direction by the technical organization contributed to this problem
- Documented in deficiency report BSC(V)-O1-D-124 Closed on December 12, 2001

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Historical Perspective (Continued)
Page 34

- During MTI's evaluations of the misplacement of welds, MTI reported 2 specimens as having a notch located in the incorrect location. This prompted the S&ET organization along with BSC QA to observe the supplier's process (at their facility) for fabricating specimens. The outcome of that visit indicated a loss of traceability of customer supplied Alloy 22 and TiGr7 welded plate at receipt at the supplier's facility
  - The supplier failed to record customer supplied Alloy 22 and TiGr7 welded plate shipped from Framatome Technologies, Inc. to MSC for fabricating test specimens
  - Documented in corrective action report BSC(V)-02-C-002 status provided below

Root cause Analysis Completed

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Historical Perspective
(Continued)

- Corrective Actions Taken
  - The supplier has been removed from the OCRWM QSL
  - Reassignment of roles and responsibilities in S&ET
  - BSC QA implementing processes to improve supplier quality (communication, surveillances, follow-up audits)
  - S&ET, BSC QA, and Procurement working together to provide clear and concise direction in supplier contracts and analyticalitechnical service contracts
    - Transfer of material between suppliers and across organizations
    - Development of materialisample acceptance plans
    - Hold points during fabrication process

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Status of Conditions Adverse to Quality

- CAR No. BSC(V)-02-C-002 (Loss of Traceability)
   Closed April 4, 2002
  - Material to be controlled by NCRs
- Outstanding Deficiency Reports
  - BSC(V)-02-D-043, supplier deficient in calibrating roughness standards. The standards have since been calibrated to a master standard and found to be in tolerance. DR is closed (no impact to YMP work)
  - BSC(V)-02-D-044, supplier failed to complete an anomaly report for specimens that were out of tolerance. The specimens are being used for non-Q testing activities. DR is closed (no impact to YMP work)

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Status of Conditions Adverse to Quality (Continued)

- BSC(V)-02-D-045, supplier is deficient in evaluating sub-tier suppliers. One outstanding supplier (R&R Gage Co.) still needs to be evaluated. (Evaluation of impact is ongoing)

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Non-Conformance Reports

- Two NCRs (YMSCO-02-0021 Loss of Traceability and YMSCO-01 -0035 Misplacement of Welds) were generated to control specimens
  - Affected specimens at LLNL and MTI segregated and redtagged
    - Samples will not be used for any further testing

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Impact

- No Impact to SR products
- Impact to LA products
  - Sufficient samples will be in test to support LA-CA

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Path Forward

Laboratory Testing, Inc. (LTI) to Fabricate Replacement Specimens and Remainder of FY02  $$\operatorname{\textsc{Page}}\xspace37}$ 

#### Specimens

- BSC QA audited LTI December 2001 with emphasis on traceability of customer supplied material no findings
- Hold points included in the list of items to LTI's statement of work
- Surveillance by BSC QA of the fabrication process at LTI's facility scheduled for April 23, 2002

S&ET Currently Evaluating Future Specimen Needs

- Contract will be awarded through competitive bid process

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Path Forward (Continued)

- Self Assessment
  - Target Completion Date is June 30, 2002

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Item No.

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/19/02 ppt 11 ENCLOSURE 7

Combined Action Items

From The

December 5, 2001 And The April 18, 2002

NRC/DOE Quarterly QA Meeting
Description Status

Page 38

2

		2	9.ocr	
copy of	5DecOl-1	DOE will provide to	NRC the project	Completed: DOE provided a
00F1 01		responses to the QAM recommendations		esponses to the QAMA ns by letter dated April
	5Dec01 -2		low-up Completed	: was discussed in April terly QA Meeting in lieu o
f		deficiencies related This will be accompl	ished via an	an Appendix 7 meeting.
S	5Dec01-3	DOE will request the		: the FY 2002 QAMA Plan wa
		include evaluation of the DOE/BSC issued on March 11,2002 withou		
t cluding		performance measures	/metrics in the	specific provision for in
he		scope of their FY 20	02 assessment.	performance measures in t
110		<del>_</del> _	issued_to	revised scope will be _cover_this_item.
d action		Director, OQA, will	follow-up with	Completed: B. Davis close
2.		Clark County, NV, re	garding Clark Cou	nty, NV per email on 1/2/0
Nevada w	as	information that som	e labs are not	Closure with the State of
			completed (also by email)	
on repra		of Nevada will also	be informed of the outcome.	12, 2002.
D.C	 5Dec01-5	DOE agreed to inform	NRC of any Open	: on March 19, 2002, the N
RC was				etter of the first step in ging QA responsibilities:
BSC's		implementation.		internal surveillances an
d		-		ective action activities
			(with some li	mitations). These changes re on March 25, 2002. It is
be			anticipated t	hat this action item will
			Rev. 12 prior changes; howe implemented p	h the issuance of QARD to implementing further ver, if such changes are rior to issuance of Rev. Fill be informed prior to ntation.

<sup>18</sup>Apr02- 1 Provide the State of Nevada a list of New Action It
Page 39

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the external (independent) software experts, where they are from and where they are assigned on the \_\_\_\_ project.

Page 1 of2

Combined Action Items

From The

December 5, 2001 And The April 18, 2002

NRC/DOE Quarterly QA Meeting

1 8Apr02-2

Respond to Mike Markeley ~RC) New Action

Item

question on QA and the potential for software cornrnon mode failures.

1 8Apr02-3

Confirm with regard to the "metal New A

ction Item

specimens" issue that the sample/plates being discussed were the 1 V2 in. plates intended for corrosion testing with serial numbers

D-1 through D-77 and that all

\_\_\_\_\_samples were red-tagged.

1 8Apr02-4

DOE will provide the NRC with an New A

ction Item

audit schedule (to enable the NRC to facilitate their planning) for Analysis

\_\_\_\_\_ Model Reports when available.

Page2of2